

**Disclosure and Release of Information Authorization Form**  
*All States Except California*

**Property and Applicant: Do not attach this page to Employment Application**

I authorize \_\_\_\_\_ ("Property"), as either my potential employer, my existing employer, a potential client for my services, and ChoicePoint Workplace Solutions, Inc. ("ChoicePoint"), a consumer reporting agency, to retrieve information from all educational institutions, government agencies, companies, corporations, credit reporting agencies, law enforcement agencies at the federal, state, or county level, or individuals, relating to my past activities, and all information concerning my background, to supply any and all information concerning my background. The information received may include, but is not limited to, academic, residential, achievement, job performance, attendance, litigation, personal history, credit reports, driving history, sexual offender registry and criminal history records.

I understand the following background checks are the current minimum requirements according to the Property's policy guidelines if applying for or already working in certain critical positions as described below:

- Positions that may involve driving a vehicle as a regular part of the job require MVR checks.
- All positions, including but not limited to independent contractors, require criminal checks (County, Federal, and Sexual Offender Registry [SOR]).
- Accounting/financial, General Manager, General Manager in Training, and certain Society and Owner's Club positions, as well as solo independent contractors performing similar functions/services, require credit history checks, and I understand credit-reporting agencies, credit/bankruptcy litigation, and credit reports may also be included.

If applying for work and currently employed elsewhere, my current employer may be contacted.

☐ YES ☐ NO ☐ N/A

If employed in Minnesota or Oklahoma, I would like a copy of any consumer report regarding me.

☐ YES ☐ NO ☐ N/A

I understand that a consumer report may be prepared summarizing this information. If my prior employers, clients, and/or references are contacted, the report may include information obtained through personal interviews regarding my character, general reputation, personal characteristics and/or mode of living. I may request a copy of any report that is prepared regarding me and may also request the nature and substance of all information about me contained in the files of the consumer reporting agency. I acknowledge that I have been given a copy of the Summary of Your Rights under the Federal Fair Credit Reporting Act.

**Note:** If the consumer checks "YES" regarding the consumer report, or if a California consumer checks "YES" regarding the credit report (and you do request a credit report), please fax this form to your ChoicePoint Service Center. If a California consumer checks "YES" regarding the full consumer report, you will need to provide the individual with a copy of their consumer report. If the consumer checks "YES" regarding the credit report, and you do request a credit report, please fax this form to ChoicePoint at 1-800-256-5876.

ChoicePoint Account Number: \_\_\_\_\_

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The following information IS NOT considered as part of your application for employment. It is used for identification purposes. *PLEASE PRINT CLEARLY*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City State Zip: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of License: \_\_\_\_\_ Expires On: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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**I HEREBY RELEASE ANY INDIVIDUAL, BUSINESS OR GOVERNMENT ENTITY, INCLUDING ITS OFFICERS, DIRECTORS, EMPLOYEES AND AGENTS FROM ANY AND ALL LIABILITY FOR DAMAGES OF WHATEVER KIND, WHICH MAY RESULT BECAUSE OF COMPLIANCE, OR ATTEMPTED COMPLIANCE, WITH THIS AUTHORIZATION AND REQUEST TO RELEASE INFORMATION.**

*I have read, understand, and agree to the above and authorize that a photocopy of this authorization shall be accepted with the same authority as the original; and that if I become employed, volunteer, or contracted by any affiliate of the above-named Property, or already am employed, volunteer, or contracted by any affiliate of the above-named Property, this release will remain in effect throughout my employment or contract or on-going relationship with the Property.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**NOTARY:** Currently required for Statewide Criminal Checks in AL, GA, NM, RI, WV, and WY; sometimes required in MN depending on search.

State \_\_\_\_\_ County of \_\_\_\_\_

Signature \_\_\_\_\_ My commission Expires on \_\_\_\_\_